

CAP-MR/DD-Adult Day Health Endorsement Check Sheet Instructions

Introduction

Prior to site and service endorsement, business verification must take place. During the process of business verification, the provider organization submits a self study of the core rules (10A NCAC 27G .0201-.0204) verifying that they have met all the requirements therein. (The provider is not required to submit this if nationally accredited, licensed with DFS or has had a compliance review from NC Council of Community Programs within the past three years.) The documents created in adherence with the core rules should be utilized as evidence of provider compliance where noted in the check sheet and instructions.

The following set of instructions is to serve as general guidelines to facilitate the review of providers for endorsement. Service definitions, core rules (as noted above), staff definitions (10A NCAC 27G .104) and other DHHS communications (e.g. Service Records Manual, Communication Bulletins, Implementation Updates and other publications) should be used to support the reviewer's determination of compliance. In addition, the Business Entity Type Reference document (attached) assists to clarify the requirements for different business entities such as corporations, partnerships and limited liability corporations and partnerships.

Provider Requirements

In this section, the provider is reviewed to ascertain that requirements are met in order for services to be provided. The provision of services is addressed later in this endorsement process.

- 1.a.** Review identified documents for evidence that provider meets DMH/DD/SAS and/or DMA standards as related to administration responsibilities, financial oversight, clinical services and quality improvement. These standards include, but are not limited to, policies and procedures (contents of which are mandated in 10A NCAC 27G .0201 – Governing Body Policies) and the key documents required by law for the formation of the business entity. (Refer to attachment titled Business Entity Type.)
- 1.b.** Review DMA enrollment document to verify provider's date of enrollment.
- 1.c.** Review documentation that demonstrates provider is a legal US business entity. Documentation should indicate the business entity is currently registered with the local municipality **or** the office of the NC Secretary of State, that the information registered with the local municipality **or** the Secretary of State is current, and that there are no dissolution, revocation or revenue suspension findings currently attached to the provider entity. Also review corporate documentation demonstrating registration to operate a business in NC. Information for corporate entities may be verified on the web site for the Secretary of State. (Refer to key documents section of attachment titled Business Entity Type.)
- 1.d.** Adult Day Health Services must have certification by the NC Division of Aging and Adult Services. Documentation to validate certification by the Division of Aging must be present.

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2. Staffing Requirements

In this section, the reviewer is primarily concerned with the hiring practices of the provider and ensuring that all employees in place are equipped with the education, training and experience to work with the population served in the capacity and at the level of intervention for which they were hired. Staff providing the service of Adult Day Health must meet general and certification requirements to include requirements for paraprofessional in 10A NCAC 27G .0100-.0200 and requirements outlined in certification for Adult Day Health programs.

Review personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met based on certification through NC Division of Aging and Adult Services. Review the job description for paraprofessionals and review the program description and personnel manual to determine the role and responsibilities of such staff and the expectation regarding supervision. Review the following for each paraprofessional: employment application, resume, or other documentation for evidence of at least a GED or high school diploma. Each paraprofessional must have an individualized supervision plan that is carried out by a Qualified Professional or an Associate Professional. Review supervision plans to ensure that each paraprofessional is receiving supervision and review notes, schedule and other supporting documentation that demonstrate on-going supervision by the Qualified Professional or Associate Professional.

3. Service Type/Setting

Services are provided in a certified adult day health care facility and the certification must be validated through review of the documentation reflecting certification.

4. Program/Clinical Requirements

The elements in this section pertain to the provider's having an understanding of the Adult Day Health service.

- 4a.-d.** Review program description which should include verification that nursing supervision is provided as needed and according to the requirements for certification. Program description should also reflect the inclusion of health services as needed. Program description should include structured activities that promote independence, as well as social, physical and emotional well-being for the adults served in the program and is consistent with the individual interests and needs of the person. Observe program activities to verify that they are consistent with the above and reflect that nursing supervision and other health services are available.. Review the participant's person centered Plan of Care and service notes to verify that the programming is consistent with individual needs (as indicated in the Plan of Care).

Documentation Requirements

Documentation must reflect the requirements for documentation through the Division of Aging.

Review the provider's Policy and Procedure Manual to verify that documentation requirements are consistent with requirements noted above. Review service notes to verify that documentation is consistent with requirements.